#### STATE OF VERMONT

#### HUMAN SERVICES BOARD

In re	)	Fair	Hearing	No.	16,378
	)				
Appeal of	)				
	)				

## INTRODUCTION

The petitioner appeals a decision of the Department of Social Welfare finding that she is ineligible for VHAP benefits because she has student health insurance available to her.

# FINDINGS OF FACT

- 1. The petitioner is a twenty-one year old student at Champlain College. She attends school full-time during the academic year and works part-time.
- 2. As a full-time student, the petitioner is eligible to participate in her school's student insurance program.

  That program operates two plans which will pay the excess not covered by another plan in case of accidental injury, disease or illness. The first, which costs \$110 per year, covers doctor's and hospital bills with maximums of \$2500 per incident for the physician and \$100 per day for 31 days for the hospital. It also covers other medical expenses up to

\$2500 for any accident. The second plan, which costs \$430 annually, provides a larger benefit for both physician and hospital bills and other medical expenses. Neither plan covers dental treatment or normal health checkups. These plans are in effect for the entire year, including summers or times when the student is not in school.

- 3. The petitioner applied last winter for VHAP benefits through the Department of Social Welfare. She sought this coverage because it is more comprehensive than the school's coverage and less expensive.
- 4. The Department notified the petitioner that she was not eligible for VHAP benefits because she was a student "under the age of 23 and. . .eligible for health insurance covering hospital and physician services offered through" her college.
- 5. The petitioner obtained Plan A insurance through the school and plans to get Plan B this Fall. However, she feels that both plans are inadequate because non-covered items like check-ups and dental care and the limitations on the amount of payments will cost her money which she does not have.

#### ORDER

The decision of the Department is affirmed.

### REASONS

The Department of Social Welfare's regulations include students in VHAP eligibility under certain conditions. See W.A.M. 4001.6. However, the regulations also prohibit coverage to persons who already have certain types of health insurance and to students who have insurance available to them through their schools and have failed to apply for it:

## Uninsured or Underinsured

An individual meets this requirement if he/she does not have other insurance that includes both hospital and physician services, and did not have such insurance within the 12 months prior to the month of application. The requirement is waived if, access to employersponsored insurance is lost during this period because of:

- a. loss of employment, or
- b. death or divorce, or
- c. loss of eligibility for coverage as a dependent under a policy held by the individual's parent(s).

In addition, students under the age of 23 enrolled in a program of an institution of higher education are not eligible for coverage if they have elected not to purchase health insurance covering both hospital and physician services offered by their educational institution or if they are eligible for coverage though the policy held by their parent(s), but their parents have elected not to purchase this coverage.

W.A.M. 4001.2

The petitioner currently has health insurance which covers both hospital and physician services. As such, she is

considered an insured person for purposes of this program. The regulation does not delve into the extent of the physician and hospital services covered by the insurance the individual has or compare the benefits available to those in the VHAP program. The possession of such coverage alone is sufficient to disqualify the individual from VHAP benefits. In addition, if the petitioner were to drop these benefits she would also be disqualified under the above regulation which specifically eliminates students under 23 years of age who have opted not to purchase their school's health insurance. The decision of the Department is correct under its regulations and should be upheld. 3 V.S.A. § 3091(d), Fair Hearing Rule No. 17.

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